

Amend the remaining claims as follows:

Sub D1
15. (Amended) In a method of treating infertility disorders by administering an LH-RH Antagonist and inducing follicle growth by administration of exogenous gonadotropin, the improvement of administering an amount of LH-RH Antagonist ~~is an amount effective~~ [so low as to] only to suppress endogenous LH, while FSH secretion is maintained at a natural level and individual estrogen development is not affected.

Sub C1
18. (Amended) The method according to claim 15 wherein after the inhibition of the action of natural LH caused by the LH-RH Antagonist, ~~the follicle development~~ is not externally stimulated [(e.g. by the addition of gonadotropins)] but maintained by endogenous gonadotropins.

Sub D3
19. (Amended) The method according to claim 18 wherein after the inhibition of the action of natural LH caused by Cetorelix, the follicle development is not externally stimulated [(e.g. by the addition of gonadotropins)] but maintained by endogenous gonadotropins.

Sub C2
20. (Amended) The method according to claim 16 wherein Cetorelix is administered subcutaneously in an amount [from 0,1 to 1 mg per days] of about 0.25 mg or (higher) per day during a multiple dosing posology.

26. (Amended) The method of claim [11] 16 in which